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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT				Docket No.		
OIPE (Under 37 CFR 1.97(b) or 1.97(c))  RECEIVED  P00252-US						
In Re	Application Of	PINGA, Louis J. et al.	SEP 27 2000			
B	Serial No. 09/544058448	Filing Date April 6, 2000	TECH CENTER 2700 Examiner	Group Art Unit 2768		
Title: CASINO BETTING, RATING AND INVESTMENT SYSTEM						
Address to: Assistant Commissioner for Patents Washington, D.C. 20231						
37 CFR 1.97(b)						
1.   The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.						
		37 CF	R 1.97(c)			
2. 🗆	2. The Information Disclosure Statement submitted herewith is being filed after three months of the filing of a national application, or the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or after the mailing date of a first Office Action on the merits, whichever occurred last but before the mailing date of either:					
	1.	a Final Action under 37 CFR 1.11	3, or	•		
e1 1	2.	a Notice of Allowance under 37 C	FR 1.311,			
- <b>j</b> '	whichever occurs first.					
Also submitted herewith is:						
	☐ a certification as specified in 37 CFR 1.97(e);					
OR						
		set forth in 37 CFR 1.17(p) for so CFR 1.97(c).	ubmission of an Information Di	sclosure Statement		
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TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No.	$\overline{}$					
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(Under 37 CFR 1.97(b) or 1.97(c)) P00252-US						
OIPE "RECEIVED"						
In ReApplication Of: Tringa, Louis J. et al.						
SEP 2 5 2000 SEP 2						
H IFON						
Serial No. Filing Date Examine 700 Group Art Unit						
09/5 40 50 April 6, 2000 2768						
Title: CASINO BETTING, RATING AND INVESTMENT SYSTEM						
Payment of Fee						
(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))						
A check in the amount of is attached.						
☐ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 02-0900						
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Jennifer Voll						
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*This certificate may only be used if paying by						
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